

MAPLEWOOD CENTER

8615 WEST BELOIT ROAD

WEST ALLIS 53227 Phone: (414) 607-4100

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 150

Total Licensed Bed Capacity (12/31/03): 150

Number of Residents on 12/31/03: 130

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

Yes

Yes

Yes

137

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		20.0	
Supp. Home Care-Personal Care	No					1 - 4 Years		33.1	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.8	Under 65	0.8	More Than 4 Years		12.3	
Day Services	No	Mental Illness (Org./Psy)	13.8	65 - 74	6.9				
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	27.7			65.4	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.3	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.8	95 & Over	12.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	17.7		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	2.3	65 & Over	99.2				
Transportation	No	Cerebrovascular	11.5			RNs		16.7	
Referral Service	No	Diabetes	1.5	Gender	%	LPNs		12.6	
Other Services	No	Respiratory	2.3			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	49.2	Male	19.2	Aides, & Orderlies			
Mentally Ill	No			Female	80.8				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	25	100.0	304	33	97.1	124	0	0.0	0	71	100.0	239	0	0.0	0	0	0.0	0	129	99.2	
Intermediate	---	---	---	1	2.9	102	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.8	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	25	100.0		34	100.0		0	0.0		71	100.0		0	0.0		0	0.0		130	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.2	Bathing	0.0	56.2	43.8	130
Other Nursing Homes	1.3	Dressing	0.8	72.3	26.9	130
Acute Care Hospitals	86.7	Transferring	10.8	66.2	23.1	130
Psych. Hosp.-MR/DD Facilities	0.6	Toilet Use	6.2	56.2	37.7	130
Rehabilitation Hospitals	5.6	Eating	35.4	51.5	13.1	130
Other Locations	5.4	*****				
Total Number of Admissions	480	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	13.8	Receiving Respiratory Care		11.5
Private Home/No Home Health	24.1	Occ/Freq. Incontinent of Bladder	55.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	15.8	Occ/Freq. Incontinent of Bowel	33.8	Receiving Suctioning		0.0
Other Nursing Homes	2.8			Receiving Ostomy Care		3.8
Acute Care Hospitals	22.1	Mobility		Receiving Tube Feeding		3.8
Psych. Hosp.-MR/DD Facilities	0.8	Physically Restrained	0.0	Receiving Mechanically Altered Diets		40.0
Rehabilitation Hospitals	0.0					
Other Locations	18.7	Skin Care		Other Resident Characteristics		
Deaths	15.6	With Pressure Sores	12.3	Have Advance Directives		90.0
Total Number of Discharges (Including Deaths)	493	With Rashes	8.5	Medications		
				Receiving Psychoactive Drugs		58.5

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.9	87.9	1.00	87.0	1.01	86.6	1.02	87.4	1.01
Current Residents from In-County	93.1	87.5	1.06	86.4	1.08	84.5	1.10	76.7	1.21
Admissions from In-County, Still Residing	13.1	22.9	0.57	18.9	0.69	20.3	0.65	19.6	0.67
Admissions/Average Daily Census	350.4	144.5	2.42	166.7	2.10	157.3	2.23	141.3	2.48
Discharges/Average Daily Census	359.9	147.5	2.44	170.6	2.11	159.9	2.25	142.5	2.53
Discharges To Private Residence/Average Daily Census	143.8	49.7	2.89	69.1	2.08	60.3	2.39	61.6	2.33
Residents Receiving Skilled Care	99.2	93.9	1.06	94.6	1.05	93.5	1.06	88.1	1.13
Residents Aged 65 and Older	99.2	97.1	1.02	91.3	1.09	90.8	1.09	87.8	1.13
Title 19 (Medicaid) Funded Residents	26.2	50.3	0.52	58.7	0.45	58.2	0.45	65.9	0.40
Private Pay Funded Residents	54.6	34.6	1.58	22.4	2.44	23.4	2.34	21.0	2.61
Developmentally Disabled Residents	0.8	0.6	1.29	1.0	0.75	0.8	0.91	6.5	0.12
Mentally Ill Residents	13.8	35.5	0.39	34.3	0.40	33.5	0.41	33.6	0.41
General Medical Service Residents	49.2	23.0	2.14	21.0	2.35	21.4	2.31	20.6	2.40
Impaired ADL (Mean)	59.4	51.9	1.14	53.1	1.12	51.8	1.15	49.4	1.20
Psychological Problems	58.5	62.2	0.94	60.0	0.97	60.6	0.96	57.4	1.02
Nursing Care Required (Mean)	10.0	7.2	1.38	7.2	1.39	7.3	1.38	7.3	1.36